

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NOVEL TETRAHYDROQUINOLINE DERIVATIVES

the application of which

☐ is attached hereto

OR

☒ was filed on August 1, 2003 as United States Application Number or PCT International Application Number PCT/JP03/09815, (Confirmation No. _____), and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified application, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part application(s), material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application(s) which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application(s) having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority Claimed	
			Yes	No
<u>225300/2002</u>	<u>Japan</u>	<u>August 1, 2002</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

I hereby claim domestic priority benefits under 35 United States Code §120 of any United States application(s), §119(e) of any United States provisional application(s), or §365(c) of any PCT International application(s) designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in a listed prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge my duty to disclose any information material to the patentability of this application as defined in 37 C.F.R. 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

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I hereby appoint all attorneys of **SUGHRUE MION, PLLC** who are listed under the USPTO Customer Number shown below as my attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.



23373

PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: Rec'd PCT/PTO 01 FEB 2005 10/522553			
Given Name (first and middle [if any]) <u>Motonori</u>		Family Name or Surname <u>MIYAKAWA</u>	
Inventor's Signature <u>[Signature]</u>		Date <u>12/1/04</u>	
Residence: City <u>Kyoto</u> State <u>[initials]</u>	Country <u>Japan</u>		Citizenship <u>Japanese</u>
c/o CENTRAL RESEARCH LABORATORIES, KAKEN PHARMACEUTICAL CO., LTD. of			
Mailing Address: 14, Shinomiyaminamigawara-cho, Yamashina-ku, Kyoto-shi, Kyoto 607-8042 Japan			
City <u>Kyoto</u>	State	Zip <u>607-8042</u>	Country <u>Japan</u>
NAME OF SECOND INVENTOR:			
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			
City	State	Zip	Country
NAME OF THIRD INVENTOR:			
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			
City	State	Zip	Country
NAME OF FOURTH INVENTOR:			
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			
City	State	Zip	Country
NAME OF FIFTH INVENTOR:			
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
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NAME OF SOLE OR FIRST INVENTOR:

Given Name (first and middle [if any]) Keigo		Family Name or Surname HANADA	
Inventor's Signature <i>Keigo Hanada</i>		Date January 6, 2005	
Residence: City Shiga	State	Country Japan	Citizenship Japanese
Mailing Address: 2-1-38, Hirai, Kusatsu-shi, Shiga 525-0023 Japan			
City Shiga	State	Zip 525-0023	Country Japan

NAME OF SECOND INVENTOR:

Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			
City	State	Zip	Country

NAME OF THIRD INVENTOR:

Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			
City	State	Zip	Country

NAME OF FOURTH INVENTOR:

Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			
City	State	Zip	Country

NAME OF FIFTH INVENTOR:

Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address:			
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NAME OF SOLE OR FIRST INVENTOR:			
Given Name (first and middle [if any]) <u>Nao</u>		Family Name or Surname <u>OGURO</u>	
Inventor's Signature <u>Nao Oguro</u>		Date <u>January 18, 2005</u>	
Residence: City <u>Kyoto</u>	State	Country <u>Japan</u>	Citizenship <u>Japanese</u>
c/o CENTRAL RESEARCH LABORATORIES, KAKEN PHARMACEUTICAL CO., LTD. of			
Mailing Address: <u>14, Shinomiyaminamigawara-cho, Yamashina-ku, Kyoto-shi, Kyoto 607-8042 Japan</u>			
City <u>Kyoto</u>	State	Zip <u>607-8042</u>	Country <u>Japan</u>
NAME OF SECOND INVENTOR:			
Given Name (first and middle [if any]) <u>Kazuyuki</u>		Family Name or Surname <u>FURUYA</u>	
Inventor's Signature <u>Kazuyuki Furuya</u>		Date <u>January 18, 2005</u>	
Residence: City <u>Kyoto</u>	State	Country <u>Japan</u>	Citizenship <u>Japanese</u>
c/o CENTRAL RESEARCH LABORATORIES, KAKEN PHARMACEUTICAL CO., LTD. of			
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City <u>Kyoto</u>	State	Zip <u>607-8042</u>	Country <u>Japan</u>
NAME OF THIRD INVENTOR:			
Given Name (first and middle [if any]) <u>Noriko</u>		Family Name or Surname <u>YAMAMOTO</u>	
Inventor's Signature <u>Noriko Yamamoto</u>		Date <u>January 18, 2005</u>	
Residence: City <u>Kyoto</u>	State	Country <u>Japan</u>	Citizenship <u>Japanese</u>
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